

4566-03-1589-3

**SUPPLEMENTAL APPLICATION
for the
NATIONAL BOATING SAFETY ADVISORY COUNCIL**

Your Name: _____ Date: _____

(Notification: The information requested on this page is not required to apply for membership on the National Boating Safety Advisory Council. If you choose to provide this information, it will assist in the assessment of your membership category and of your qualifications.)

Membership category you are applying for: (check the one that best applies)

- 1) State official responsible for State boating safety program []
(This is a State employee that is responsible for their State's boating safety program)
- 2) Recreational vessel or associated equipment manufacturer []
(This is an owner or employee of a recreational vessel or associated equipment manufacturer or it is a representative of an association of related manufacturers)
- 3) National recreational boating organization representative [] (Respond to a. & b. below)
(The organization must be national in scope and represent recreational boating participation)
- a. Name of organization: _____
- b. Have you obtained an endorsement from the national head of your organization to represent it on the National Boating Safety Advisory Council? Yes [] No []
- 4) General public []
(This is a person that represents the public's interest, rather than the first three categories')

Boating Background: (include types of boats operated, number of years boating, and present/past memberships/positions in boating-related organizations)

Career History: (include employer names, positions held, dates, any military service) _____

Other Items of Interest: (i.e.: professional, business, social organizations, etc.) _____

Send completed application forms and any support materials to:

Executive Director
National Boating Safety Advisory Council
Commandant (G-OPB-1)
U.S. Coast Guard Headquarters
2100 2nd Street, SW
Washington, D.C. 20593-0001